## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

appropriate. All further indicated unless corrects maintenance fee notifica	correspondence including delegations	ng the Patent, advance on herwise in Block 1, by (a	rders and notification (a) specifying a new co	of maintenance feet rrespondence addre	s will be r ss; and/or	nailed to the current (b) indicating a separ	correspondence address as cate "FEE ADDRESS" for		
		ock 1 for any change of address)	]	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.					
272	7590 03/17								
400 GARDEN O SUITE 300		z PRESSER, P.C.	-1 2 1	Certificate of Mailing or Transmission Thereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
GARDEN CITY	, NY 11530				(Deposit				
				(Signature)					
			Į				(Date)		
APPLICATION NO.	FILING DATE		FIRST NAMED INVENT	OR	ATTO	RNEY DOCKET NO.	CONFIRMATION NO.		
10/564,577 TITLE OF INVENTION	06/28/2006 SCREWABLE CHECK	K VALVE	Clemens Krebs			19360	9610		
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	JE PREV. PAID IS	SUE FEE	TOTAL FEE(S) DUE	DATE DUE		
nonprovisional	NO	\$1440	\$300	\$0		\$1740	06/17/2008 .		
EXAM	IINER	ART UNIT	CLASS-SUBCLASS						
KRISHNAMUR	THY, RAMESH	3753	137-539000						
"Fee Address" ind PTO/SB/47; Rev 03-( Number is required.		or agents OR, altern (2) the name of a s registered attorney 2 registered patent listed, no name will	the names of up to 3 registered patent attorneys agents OR, alternatively,  the name of a single firm (having as a member a gistered attorney or agent) and the names of up to registered patent attorneys or agents. If no name is ted, no name will be printed.  1 Murphy & Presser, P.C.  2						
PLEASE NOTE: Un recordation as set fort (A) NAME OF ASSI	less an assignee is ident h in 37 CFR 3.11. Comp		data will appear on the T a substitute for filing (B) RESIDENCE: (C	e patent. If an ass an assignment.			ocument has been filed for		
brueimigna	us nyoromatik	GIIOH	Etchinge	_			_		
Please check the appropr	iate assignee category or	categories (will not be pr	rinted on the patent):	☐ Individual XX	Corporati	on or other private gro	up entity Government		
	are submitted:  No small entity discount p # of Copies	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 191013 (enclose an extra copy of this form).							
5. Change in Entity Sta	tus (from status indicate is SMALL ENTITY stati	*	☐ h Applicant is no	longer claiming SM	IAII FNT	TTY status. See 37 CF	TR 1.27(a)(2)		
NOTE: The Issue Fee an	d Publication Fee If req		d from anyone other th	_			e assignee or other party in		
Authorized Signature	1004	IMA		Date	June 2	, 2008			
Typed or printed nam		esser	<del></del>		n No	19,827			
This collection of inform an application. Confiden submitting the complete this form and/or suggest Box 1450, Alexandria, V Alexandria, Virginia 223	nation is required by 37 C tiality is governed by 35 d application form to the ions for reducing this bu //irginia 22313-1450. DC 13-1450.	CFR 1.311. The information U.S.C. 122 and 37 CFR by USPTO. Time will vary	1.14. This collection is depending upon the incementation of COMPLETED FORMS	or retain a benefit be sestimated to take be ndividual case. Any fficer, U.S. Patent a STO THIS ADDRI	y the publ 2 minutes comment nd Tradem ESS. SENI	ic which is to file (and to complete, including s on the amount of tin lark Office, U.S. Depa D TO: Commissioner f	by the USPTO to process) g gathering, preparing, and ne you require to complete atment of Commerce, P.O. or Patents, P.O. Box 1450, number.		

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naintenance fee notificat		iciwise iii block 1, by (a	a) specifying a new corres					
CURRENT CORRESPONDI	ENCE ADDRESS (Note: Use Bl	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.						
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400 GARDEN C SUITE 300		Certificate of Mailing or Transmission  Thereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.						
GARDEN CITY	, NY 11530						(Depositor's name)	
							(Signature)	
							(Date)	
APPLICATION NO.	ATION NO. FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.	
10/564,577	06/28/2006		Clemens Krebs		19360 9610			
TITLE OF INVENTION		K VALVE						
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE T	OTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1440	\$300	\$0		\$1740	06/17/2008	
EXAM	IINER	ART UNIT	CLASS-SUBCLASS					
KRISHNAMUR	THY, RAMESH	3753	137-539000			0		
1. Change of correspond CFR 1.363).		2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys  Scully, Scott,  Murphy & Presser, P.C.						
	ondence address (or Cha B/122) attached.		or agents OR, alternative (2) the name of a single	e firm (having as a	member a	2	×.	
"Fee Address" ind PTO/SB/47; Rev 03-0 Number is required.	lication (or "Fee Address 02 or more recent) attacl	registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
3. ASSIGNEE NAME A	ND RESIDENCE DAT.	A TO BE PRINTED ON	THE PATENT (print or ty)	oe)				
PLEASE NOTE: Un recordation as set for	less an assignee is ident th in 37 CFR 3.11. Com	tified below, no assignee pletion of this form is NC					ocument has been filed for	
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Brueningha	us Hydromatik	: GmbH	Elchingen,	Germany				
Please check the appropriate the property of t	riate assignee category of	r categories (will not be p	rinted on the patent):	Individual XXXC	orporation	or other private gro	oup entity Government	
4a. The following fee(s)  XX Issue Fee	are submitted:	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.						
	No small entity discount	Payment by credit card. Form PTO-2038 is attached.						
Advance Order -	# of Copies		The Director is hereby overpayment, to Depo	authorized to char sit Account Number	$_{ m er}^{ m rge}$ the requer $1910$	uired fee(s), any de 013 (enclose a	eficiency, or credit any in extra copy of this form).	
5. Change in Entity Sta	etus (from status indicate	ed above)						
	ns SMALL ENTITY stat	//	b. Applicant is no lon					
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Authorized Signature	. The	JUKIN		Ju Date	ine 2,	2008		
	ne Leopold Pr					19,827		
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